

## **EXHIBIT B**

Page B

Sleep Study Interpretation  
\* Final Report \*

GRAY, KENNETH LYNN - 000023005

## IMPRESSION:

1. Sleep apnea has been previously diagnosed.
2. CPAP was titrated to as high as 19 cm of water pressure. The AHI was reduced to 0 events per hour but the mean SPO<sub>2</sub> was only able to be maintained at 83%. At this high level of therapy Rush or Intolerance becomes an issue in the patient may very well be more tolerant of BiPAP therapy.
3. Mean SPO<sub>2</sub> for total sleep time was 90% and 128.8 minutes were spent with an SPO<sub>2</sub> at or below 88%.
4. The periodic limb movement index was elevated at 162 events per hour. This could be due to the patient's sleep apnea and resolve with treatment. It could also suggest concurrent diagnosis of restless leg syndrome or periodic limb movement disorder. Clinical correlation is recommended.
5. The patient had fragmented sleep architecture with only 2 brief REM periods.
6. If the patient were to undergo surgery and need anesthesia, they need to let their surgeon and anesthesiologist know of their diagnosis of sleep disordered breathing. Post-operatively, they will need to be on their CPAP to decrease the risk of post-operative respiratory complications associated with sleep apnea.
7. The patient should be warned to not drive or operate heavy machinery while sleepy.

## RECOMMENDATIONS:

1. The patient should be scheduled for a full night BiPAP titration study but in the meantime oxygen at 3-4 L/m during times of sleep should be prescribed.

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**Signature Line**  
Electronically Signed on 04/25/18 12:31 PM

MAZZOLA, MD, ROBERT L.

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## Completed Action List:

Result type: Sleep Study Interpretation  
Result date: April 18, 2018 22:00 MDT  
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Result title: Sleep Study Cpap Interpretation  
Performed by: MAZZOLA, MD, ROBERT L. on April 17, 2018 13:05 MDT  
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